CORRECTED Application Data Sheet

Application Information

Application Type:: Continuation-in-Part

Subject Matter:: Utility

Suggested Group Art Unit:: N/A

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: SYSTEM OR METHOD FOR ANALYZING

INFORMATION ORGANIZED IN A

CONFIGURABLE MANNER

Attorney Docket Number:: 65678-0060

Request for Early Publication?:: No

Request for Non-Publication?:: No

Small Entity?:: No

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Eric

Family Name:: Swan

City of Residence:: Austin

State or Province of Residence:: TX

Country of Residence:: US

Country of Residence::

Street of mailing address::

7907 Manasses Drive

Street of mailing address:: 7907 Manasses Drive

City of mailing address:: Austin
State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78745

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Greg

Family Name:: Carter
City of Residence:: Austin

State or Province of Residence:: TX

Country of Residence:: US

Street of mailing address:: 3004 S. 4th Street

City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78704

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Paul

Family Name:: West
City of Residence:: Austin

State or Province of Residence:: TX

Country of Residence:: US

Street of mailing address:: 8133 Luling Lane

City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78729

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Robert
Family Name:: Hogan
City of Residence:: Austin

State or Province of Residence:: TX

Country of Residence:: US

Street of mailing address:: 1007 S. Congress #434

City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78704

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Elizabeth

Family Name:: Lescher
City of Residence:: Austin

City of Residence:: Austi State or Province of Residence:: TX

Country of Residence:: US

Street of mailing address:: 7744 Yaupon Drive

City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78759

Initial 05/06/04

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	09/441,289	11/16/1999
This Application	An application claiming the benefit under 35 USC 119(e)	60/166,042	11/17/1999
This Application	As application claiming benefit	09/503,671	02/14/2000
This Application	As application claiming benefit	09/504,000	02/14/2000
This Application	As application claiming benefit	09/504,343	02/14/2000
This Application	As application claiming benefit	09/653/735	09/01/2000
This Application	As application claiming benefit	09/702,363	10/31/2000
This Application	As application claiming benefit	09/714,702	11/16/2000
This Application	As application claiming benefit	09/995,287	11/26/2001
This Application	As application claiming benefit	09/995,374	11/26/2001
This Application	An application claiming the benefit under 35 USC 119(e)	60/468/440	05/06/2003

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Full Capacity

Given Name::

Jason

Family Name::

Oban

City of Residence::

Austin

State or Province of Residence::

ΤX

Country of Residence::

US

Street of mailing address::

7704 Lowdes Drive

City of mailing address::

Austin

State or Province of mailing address::

ΤX

Postal or Zip Code of mailing address::

78745

Applicant Authority Type::

Inventor

Primary Citizenship Country::

US

Status::

Kevin

Full Capacity

Given Name::

Miller

Family Name::

Austin

City of Residence::

ΤX

State or Province of Residence::

us

Country of Residence::

1003 Justin Lane

Street of mailing address:: City of mailing address::

Austin

State or Province of mailing address::

TX

Postal or Zip Code of mailing address::

78757

Correspondence Information

Correspondence Customer Number::

10291

Representative Information

Representative Customer Number::

10291

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